

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 4
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) John Bolton Super PAC		FEC IDENTIFICATION NUMBER ▼ C C00542464	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee CONNELL DONATELLI INC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 09 / 2016	
Mailing Address PO BOX 1877		Amount 5876.76	
City ALEXANDRIA	State VA	Zip Code 22313	Transaction ID : SE1
Purpose of Expenditure MEDIA	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2016	
Name of Federal Candidate HASSAN, MARGARET, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought 655876.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee CONNELL DONATELLI INC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 09 / 2016	
Mailing Address PO BOX 1877		Amount 125000.00	
City ALEXANDRIA	State VA	Zip Code 22313	Transaction ID : SE2
Purpose of Expenditure MEDIA	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2016	
Name of Federal Candidate HASSAN, MARGARET, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought 655876.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	130876.76
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hobbs, Cabell, , ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 09 / 2016

Signature